

HOW TO SUBMIT A NEW CERTIFICATE IN TRACK4LA

NOTE: Adobe Reader x (10.01) or higher must be installed onto your computer prior to completing a certificate submission.

STEP 1: Log into Track4LA

- Go to <http://track4la.lacity.org/>
- Enter your individual (not agency) broker license number
- Enter your assigned password



Registered Broker Login

Broker ID :

Password : **Login >>**

☐ Remember My Broker ID

I Forgot my Broker ID or Password

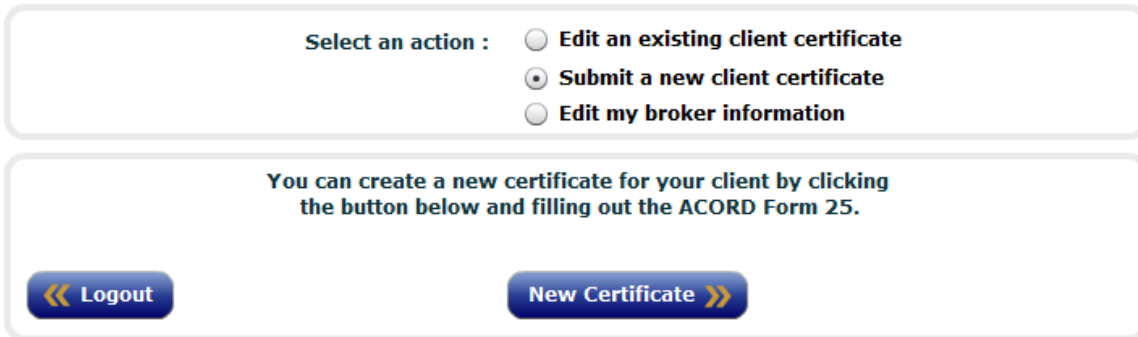
Register For Track4LA® >>

Verify Insurance/Bonds >>

[Bond Submittals](#)

STEP 2: Select the action to "Submit a new client certificate"

- Mark "Submit a new client certificate"
- Click **New Certificate >>**

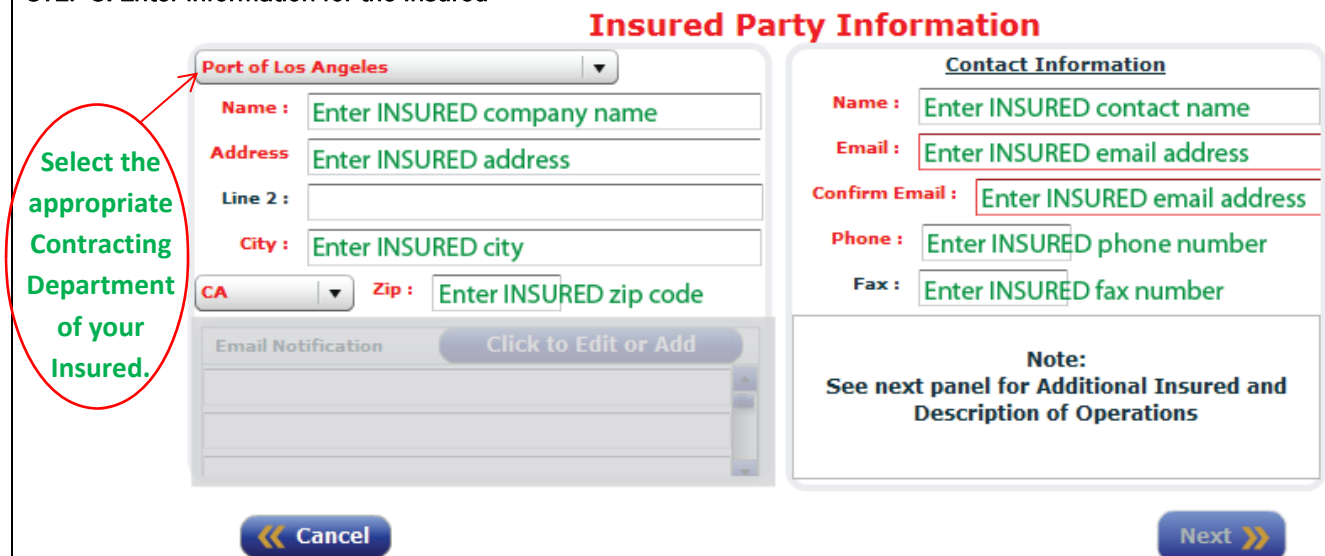


Select an action : ☐ Edit an existing client certificate
☒ Submit a new client certificate
☐ Edit my broker information

You can create a new certificate for your client by clicking the button below and filling out the ACORD Form 25.

<< Logout **New Certificate >>**

STEP 3: Enter information for the Insured



Insured Party Information

Port of Los Angeles ▼

Name : Enter INSURED company name

Address Enter INSURED address

Line 2 :

City : Enter INSURED city

CA ▼ **Zip :** Enter INSURED zip code

Email Notification **Click to Edit or Add**

Contact Information

Name : Enter INSURED contact name

Email : Enter INSURED email address

Confirm Email : Enter INSURED email address

Phone : Enter INSURED phone number

Fax : Enter INSURED fax number

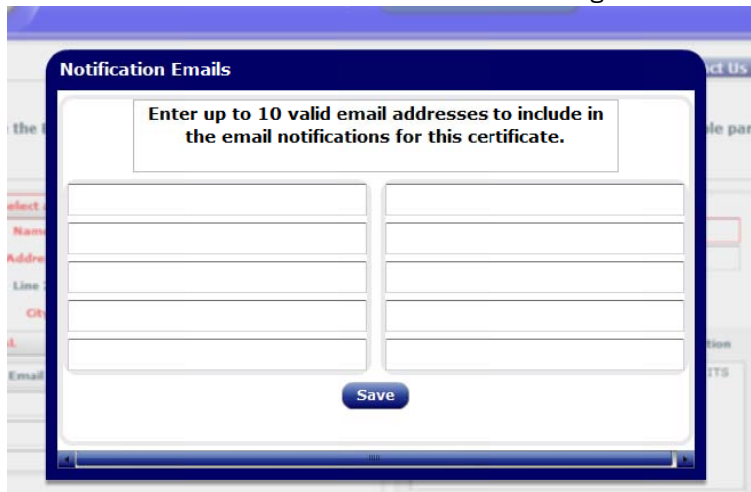
Note:
See next panel for Additional Insured and Description of Operations

<< Cancel **Next >>**

Select the appropriate Contracting Department of your Insured.

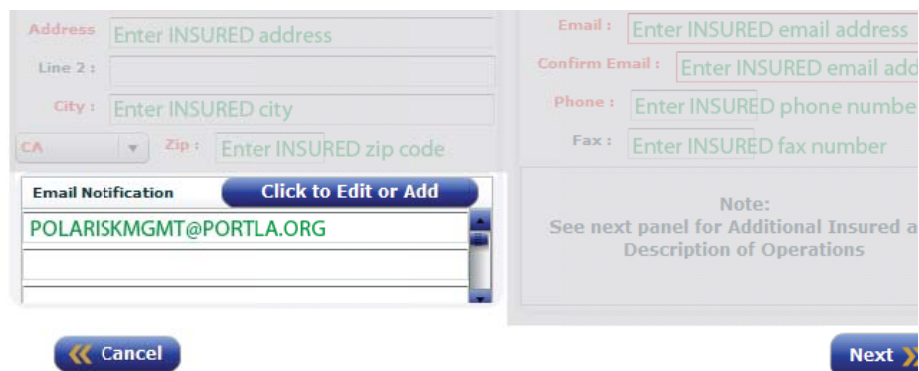
STEP 4: Add additional recipients to notify of approval by the Track4LA system

- a) Click **Click to Edit or Add** to enter recipient email addresses
- b) Up to 10 email addresses can be added. Click **Save** after entering email addresses.



The dialog box is titled "Notification Emails". It contains a text area with the instruction: "Enter up to 10 valid email addresses to include in the email notifications for this certificate." Below the text area are two columns of input fields for email addresses. At the bottom center is a "Save" button.

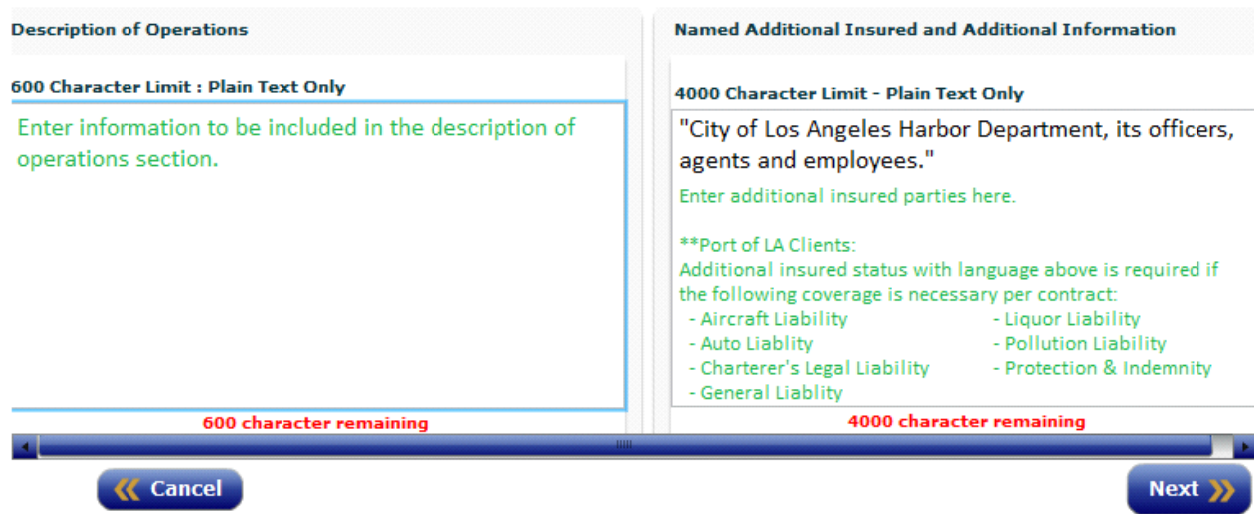
- c) Click **Next >>**



The main form is divided into two sections. The left section contains fields for "Address", "Line 2", "City", "CA" (dropdown), and "Zip". Below these is an "Email Notification" section with a "Click to Edit or Add" button and a list of email addresses, with "POLARISKMGMT@PORTLA.ORG" currently selected. The right section contains fields for "Email", "Confirm Email", "Phone", and "Fax". Below these is a "Note" section that says "See next panel for Additional Insured and Description of Operations". At the bottom are "Cancel" and "Next >>" buttons.

STEP 5: Enter additional insured and Description of Operations information

Other Information



The form is titled "Other Information" and is divided into two main sections. The left section is titled "Description of Operations" and has a "600 Character Limit : Plain Text Only" label. It contains a text area with the instruction: "Enter information to be included in the description of operations section." Below the text area is a "600 character remaining" indicator. The right section is titled "Named Additional Insured and Additional Information" and has a "4000 Character Limit - Plain Text Only" label. It contains a text area with the instruction: "Enter additional insured parties here." Below the text area is a "4000 character remaining" indicator. At the bottom are "Cancel" and "Next >>" buttons.

STEP 6: Enter the insurance company names

- a) Type is a partial entry into the Insurer Name box. Once the **Find** box appears to the right, click it.
- b) **Select** the appropriate insurance company from the list.

A Insurer Name :	<input type="text"/>	NAIC Code :	<input type="text"/>
B Insurer Name :	<input type="text"/>	NAIC Code :	<input type="text"/>
C Insurer Name :	<input type="text"/>	NAIC Code :	<input type="text"/>
D Insurer Name :	<input type="text"/>	NAIC Code :	<input type="text"/>
E Insurer Name :	<input type="text"/>	NAIC Code :	<input type="text"/>
F Insurer Name :	<input type="text"/>	NAIC Code :	<input type="text"/>

<< Cancel **Is General Liability Coverage Included?** ☐ Yes ☐ No **Next >>**

STEP 7: (REQUIRED ONLY WHEN SUBMITTING GENERAL LIABILITY) Select the appropriate additional insured endorsement.

- a) Select the **Yes** ☒ button, and click **Select GL Endorsement >>**

<< Cancel **Is General Liability Coverage Included?** **Yes** ☒ ☐ No **Select GL Endorsement >>**

- b) Check off the appropriate additional insured endorsement. Then click

Read Endorsement Notice

- c) Read the notice, and click **Agree and Accept** to continue.

- d) Click **Go To Form >>**

- e) Click **Yes** to continue to the Acord form.

STEP 8: Complete the Acord form.

- a) The following fields highlighted in blue are the remaining information to be inputted:

COVERAGES		CERTIFICATE NUMBER:		REVISION NUMBER:	
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.					
INSR LTR	TYPE OF INSURANCE	ADDL INSR (ISS, WVD)	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)
	GENERAL LIABILITY				
	COMMERCIAL GENERAL LIABILITY				
	CLAIMS-MADE <input type="checkbox"/> OCCUR <input type="checkbox"/>				
	GEN'L AGGREGATE LIMIT APPLIES PER:				
	POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/>				
	AUTOMOBILE LIABILITY				
	ANY AUTO				
	ALL OWNED AUTOS				
	HIRED AUTOS				
	SCHEDULED AUTOS				
	NON-OWNED AUTOS				
	UMBRELLA LIAB				
	EXCESS LIAB				
	OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/>				
	DED <input type="checkbox"/> RETENTION \$				
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICEMEMBER EXCLUDED? (Mandatory in NH)				
	If yes, describe under DESCRIPTION OF OPERATIONS below				
	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)				
			LIMITS		
			EACH OCCURRENCE \$		
			DAMAGE TO RENTED PREMISES (Ea occurrence) \$		
			MED EXP (Any one person) \$		
			PERSONAL & ADV INJURY \$		
			GENERAL AGGREGATE \$		
			PRODUCTS - COM/OP AGG \$		
			COMBINED SINGLE LIMIT (Ea accident) \$		
			BODILY INJURY (Per person) \$		
			BODILY INJURY (Per accident) \$		
			PROPERTY DAMAGE (Per accident) \$		
			EACH OCCURRENCE \$		
			AGGREGATE \$		
			WC STATU- TORY LIMITS \$		
			OTH- ER \$		
			E.L. EACH ACCIDENT \$		
			E.L. DISEASE - EA EMPLOYEE \$		
			E.L. DISEASE - POLICY LIMIT \$		

- b) After reviewing all information on the Acord form, click **Submit** at the bottom of page 1.

FREQUENTLY ASKED QUESTIONS

Will this new submission replace the old certificate?

No. This submission will become a new submission in Track4LA, and a new certificate approval number will be assigned. The old certificate will remain in the system.

I submitted a certificate, but never received a conformation email, nor was the certificate searchable via <http://caoib.ci.la.ca.us/>

Track4LA may take up to 24 hours to refresh new data. Please search for your certificate the next day on <http://caoib.ci.la.ca.us/>. Use the insured's name (or partial entry) as your search key.

The website only shows a portion of the page, and I cannot access necessary buttons to move forward.

Adjust the image size of your webpage by holding down your control (Ctrl) button and pressing the plus or minus (+/-) button. You may need to do this multiple times until the image shows all content of the website. Also try maximizing your internet browser screen.

I need to submit Property Insurance. Is the Acord 27 form available through Track4LA?

No. Property insurance coverage can be referenced on the Acord 25 form, in the row below the Workers' Compensation section. Additional information for property insurance other than the policy number, term dates, and limits can be referenced in the description of operations section.

How do I attach the applicable endorsements?

Documents cannot be uploaded/attached to Track4LA. Endorsement information for additional insured or waiver of subrogation can be referenced by marking a "Y" in the "ADDL INSR" and/or "SUBR WVD" columns. The applicable endorsement numbers and entities and for which the additional insured and waiver of subrogation are included for should be referenced in the addendum (page 2). Endorsements other than additional insured and waiver of subrogation should be referenced on the addendum (page 2), and includes a description of the endorsement.

I received an error message, but don't understand what it means.

Common Error Message:	Reason:	Try This:
"Certificate save failed."	The system may be going through minor maintenance which may be causing glitches.	Try submitting the certificate again in a few hours, or the next day.
"Truncated"	Characters have been maxed out in a field.	Check the description of operations section. The description of operation section allows a maximum of 600 characters. Check the Addendum section (page 2). This section allows a maximum of 4000 characters.
"Incorrect syntax"	A symbol or text type is not allowed in one of the fields provided.	On the Acord certificate, ensure that <ul style="list-style-type: none">• The limits box in the last coverage row does not contain a "\$"

symbol.

- The policy effective and expiration dates use a “/” (slash) symbol instead of a “-” (dash) symbol.